

## DEBATE: ENTANGLEMENT AND HOMEOPATHY

# Entanglement and some heretical thoughts about homeopathy

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**This paper proposes the emergent entanglement theory of homeopathy. This is based on the lack of evidence that choice of homeopathic medicine is important and predicts links between effectiveness of homeopathic medicines and their manufacturers. It predicts that there will be a consistent variation, in terms of outcome, between homeopaths, and between medicines made by different manufacturers, but not the specific homeopathic medicines prescribed. This theory is potentially testable.**

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Peter's Fisher's useful and balanced editorial suggests that<sup>1</sup>: 'Most of the entanglement hypotheses (except Weingartner's) have difficulty in accounting for the fact that self-prescribed homeopathy is the most popular and fastest growing use of homeopathy in many parts of the world.' Any theory of homeopathy needs to be able to account for the experience of the clinical practice of homeopathy. The point is therefore an important one which needs addressing.

There are several versions of entanglement. My most recent version<sup>2,3</sup> was published after Fisher's editorial and his criticism is particularly apposite to this recent version, because it raises issues about the nature of the remedy in contrast to the therapeutic interaction. This commentary provides a solution to his criticism, and leads to some novel testable predictions. The emergent theory of entanglement is a contextual theory in that it suggests that homeopathy does not provide 'corrective information' to the patient, but rather sets up an 'entangling context' which allows the patient to self-heal. This entangling context could be described as a spiritual context, although the meaning of 'spiritual' is somewhat variable. From the perspective of emergent entanglement, the process of choosing the remedy is important but the choice of remedy is not. This may appear to run counter to clinical experience, but

consider the following observation. Homeopaths vary between themselves in term of the number of remedies they prescribe from the 2000 or so available in the repertory. Some (experienced) homeopaths prescribe about half a dozen; others prescribe many more. From this observation, it seems that the process of choosing is important. However, if experienced homeopaths prescribe fewer remedies, then it appears that the choice is unimportant. The counter-argument from clinical practice is that the homeopath may not choose the correct remedy on the first occasion, and so tries something else. So choice appears to be important. However, it may be that the process of choosing was not 'right' for the patient at that particular time, or that the particular perspective on the patient's problem (ie, the homeopaths understanding) was not a perspective that helped the patient to entangle with the context. There is, to my knowledge, no clear evidence that the choice of remedy is important in contrast to the process of choosing.

If choice of remedy is unimportant, where does this leave self-prescribed homeopathy? First, there is still a process of choosing; this process is carried out by the patient rather than a homeopath. However, if the choice is not important a sugar pill could be substituted for the remedy without adverse effect, and this runs contrary to clinical experience. The theoretical solution, I believe, is that the manufacturer becomes entangled with the remedy, and therefore becomes part of the therapeutic context. That is,

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homeopathic remedies are effective not because they have a memory of some physical action during manufacture but because of entanglement with the therapeutic intent of the person who made them. That is, remedies are carriers of the intent of a person who made them. While this idea may appear odd, it is not entirely new. I quote from recent correspondence with the Secretary of the British Association of Flower Essence Producers which predated Fisher's editorial - although flower essences and homeopathy have different rationale, the similarity will become clear shortly.

'With essences, it has been experienced even by distributors who stock essences, that essences seem to have a link to the producers. If the producer is ill, then the distributor often detects a shift in the energies of their essences and they might be less popular until the producer recovers.' (*Sue Lilly, personal communication, quoted with permission.*)

The hypothesis is simple: that homeopathic remedies and flower essences are effective because of the people involved in their manufacture. This hypothesis leads to a simple prediction. The effectiveness of homeopathic remedies, in particular self-prescribed but also perhaps therapist prescribed, will vary between manufacturers (as will flower essences). Manufacturers vary according to the characteristics of the people who make them, and also, possibly, the organisational structure and ethos of the manufacturing company.

The following predictions derive from the contextual theory of entanglement. Testing them would require collaboration of many homeopaths.

1. There will be consistent variation between homeopaths in terms of effectiveness. I.e. some homeopaths will consistently produce better outcomes than others.
2. There will be no relationship between successful/unsuccessful homeopaths and pattern of choice of remedies, nor will there be any relationship with length of training. (It is worth noting in this context that length or type of training do not predict the large therapist effects observed in psychotherapy).<sup>4,5</sup>
3. Homeopathy can be interpreted as a spiritual activity, and good homeopaths are likely to have greater spiritual awareness though what is meant by spiritual awareness needs refining.

4. The effectiveness of a remedy varies between manufacturers, and the spiritual awareness of the manufacturers process will predict effectiveness.
5. In the case of self-prescribed homeopathy, the choice of remedy is less important than the choice of manufacturer.
6. A 'placebo' remedy made by a manufacturer in the same way as verum with the same therapeutic intent, will be as effective as the verum.

Some readers of this journal will take exception to these predictions and ideas. However, from a historical perspective, homeopathy was conceived as a spiritual therapy, not a mechanical one. The following is quoted from the introduction of Hahnemann's *Organon*.<sup>6</sup>

'The champions of this clumsy doctrine of morbid matters ought to be ashamed that they have so inconsiderately overlooked and failed to appreciate the spiritual nature of life, and the spiritual dynamic power of the exciting causes of diseases, and that have thereby degraded themselves into mere scavenger-doctors, who, in their efforts to expel from the diseased body morbid matters, that never existed, in place of curing, destroy life.'

We need to consider the possibility that homeopathy works, not just for psychological reasons, nor because there is a local memory contained in the remedy that provides corrective information to a mechanical problem, but rather because homeopathy is a ritual that enhances a person's natural ability to become entangled and where entanglement is a healing state.

## References

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